

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-01-2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$3,005.06	-3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Certified Acts of Terrorism charge is now included in the Directors and Officers premium.

*Adjusted to reflect all prior rate changes.

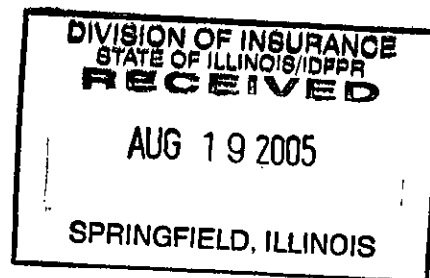
**Change in Company's premium level which will result from application of new rates.

Addison Insurance Company

Name of Company

Loraine A Kelty - Product Analyst

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/01/2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	\$628,965	-0.4%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are filing to adopt ISO designation GL-2005-BGL1, without modification.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Alea North America Insurance Co

Name of Company



Susanne M. Rickwell, CFSR
 Compliance Filings Analyst
 Official - Title

Insurer Name: American Automobile Insurance CompanyNAIC Number 21849

E X H I B I T A

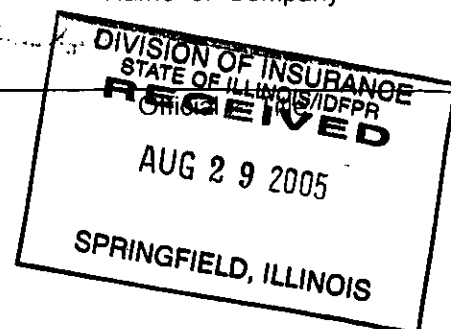
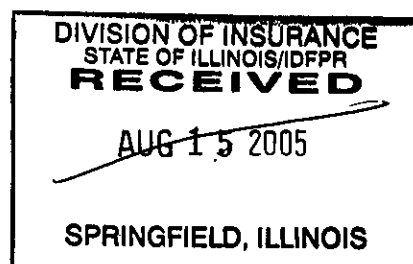
Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective December 1, 2005

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	521,270	-3.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: NOBrief description of filing. (If filing follows rates of an advisory
organization, specify organizations): Adopting ISO's Loss Cost Reference # GL-2005-BGL1,
and revising LCMs.

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will
result from application of new ratesAmerican Automobile Insurance Company
Name of Company

Insurer Name: The American Insurance CompanyNAIC Number 21857

E X H I B I T A

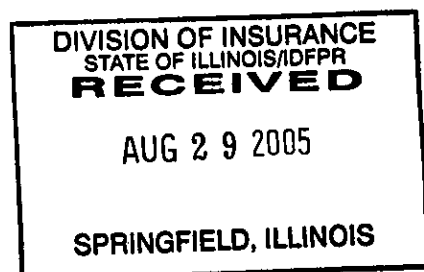
Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective December 1, 2005

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	3,187,945	-6.1%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: NOBrief description of filing. (If filing follows rates of an advisory
organization, specify organizations): Adopting ISO's Loss Cost Reference # GL-2005-BGL1,
and revising LCMs.

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will
result from application of new rates

The American Insurance Company

Name of Company

Secretary, Insurance

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	125,549	-9.9%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

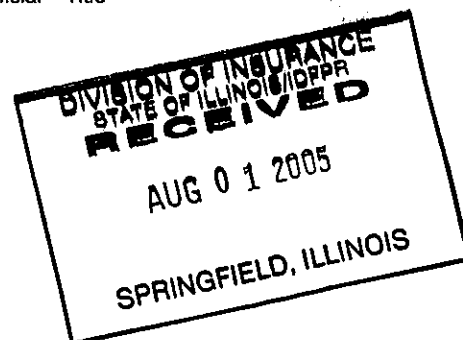
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopt LC in ISO filing designation GL-2005-BGL1 with no other changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Amerisure Insurance Company
Name of Company

Joan Walters – Compliance Analyst I
Official – Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective November 1, 2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	2,004,403	-9.9%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

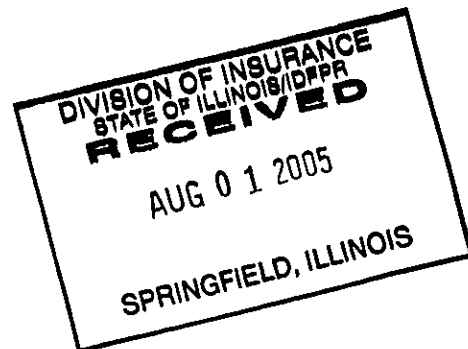
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Adopt LC in ISO filing designation GL-2005-BGL1 with no other changes.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Amerisure Mutual Insurance Company
Name of Company

Joan Walters – Compliance Analyst I
Official – Title



Insurer Name: Associated Indemnity Corporation

NAIC Number 21865

E X H I B I T A

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective December 1, 2005

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois) *</u>	<u>Percent Change (+ or -) **</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	<u>1,262,301</u>	<u>-8.4%</u>
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain
classes? If so, specify: NO

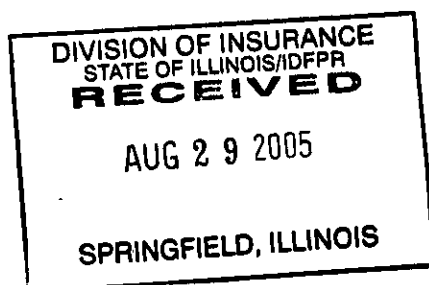
Brief description of filing. (If filing follows rates of an advisory
organization, specify organizations): Adopting ISO's Loss Cost Reference # GL-2005-BGL1,
and revising LCMs.

- * Adjusted to reflect all prior rate changes
** Change in Company's premium level which will
result from application of new rates

Associated Indemnity Corporation

Name of Company

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 10/1/2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto	381,797	-0.6%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing applies only to Farm Equipment Dealers. See Summary Page 1 for a breakdown of
proposed changes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revising Type of Business Factors.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

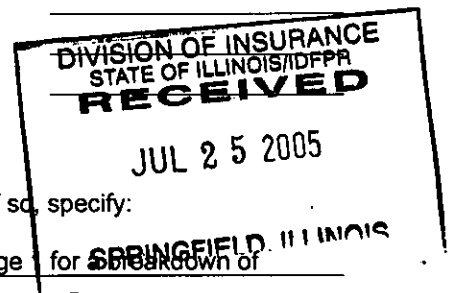


Name of Company
Federated Service Insurance Company
Peter Kehler
Vice President
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 9/1/2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto	381,797	-1.6%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

This filing applies only to Farm Equipment Dealers. See Summary Page for breakdown of
proposed changes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revising Type of Business Factors, adding new class codes to base rates, rules, and forms.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

Federated Service Insurance Company
Name of Company

Peter Hehler

Vice President

Official - Title

NAIC Number 21873

E X H I B I T A

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective December 1, 2005

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	873,664	-3.3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: NO

Brief description of filing. (If filing follows rates of an advisory organization, specify organizations): Adopting ISO's Loss Cost Reference # GL-2005-BGL1, and revising LCMs.

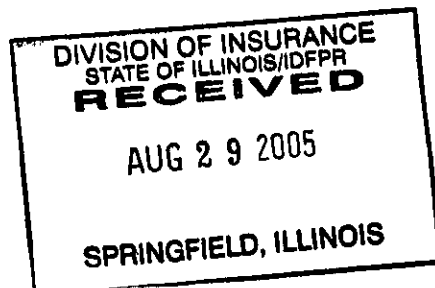
* Adjusted to reflect all prior rate changes

Change in Company's premium level which will result from application of new rates

Fireman's Fund Insurance Company

Name of Company

Official - Title

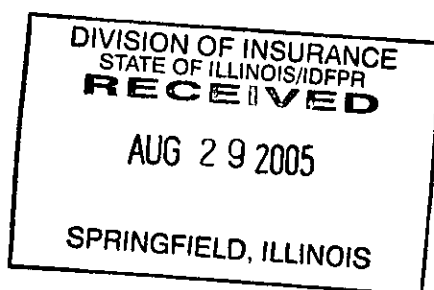


SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision effective: January 1, 2006

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$410,013 12-31-04	+4%
4. Burglary & Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler & Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine _____		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Worker's Compensation		
16. Other:		



Line of Insurance

Does filing only apply to certain territory (territories) or certain classes? Contractors

If so, specify: Revises Commercial General Liability Contractors Commercial Package Modification Factor

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the Commercial General Liability Commercial Package Program Factor for Contractors

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

IMT Insurance Company (Mutual)

Name of Company

Anita Lee, CPCU, ARP, Senior Compliance Analyst, Research & Development
Official - Title

Insurer Name: National Surety CorporationNAIC Number 21881

E X H I B I T A

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate
revision effective December 1, 2005

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	1,677,624	-0.1%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

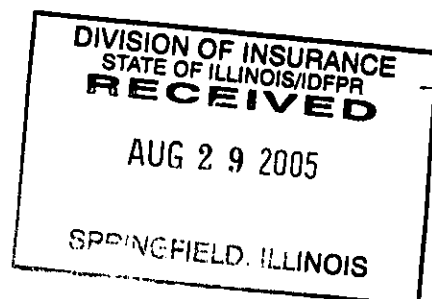
Does filing only apply to certain territory (territories) or certain
classes? If so, specify: NOBrief description of filing. (If filing follows rates of an advisory
organization, specify organizations): Adopting ISO's Loss Cost Reference # GL-2005-BGL1,
and revising LCMs.

* Adjusted to reflect all prior rate changes

** Change in Company's premium level which will
result from application of new ratesNational Surety Corporation

Name of Company

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective -15%

	(1)	(2)	(3)
	<u>Coverage</u>	<u>Annual Premium</u>	<u>Percent</u>
		<u>Volume (Illinois)*</u>	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$1,454,515 [12-2004]	-15%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

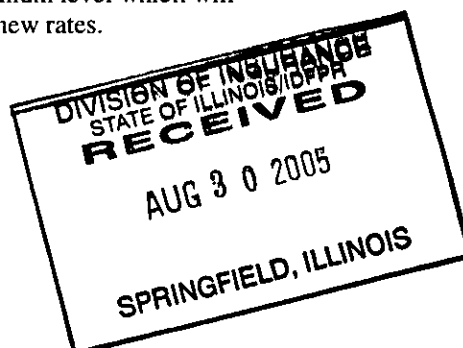
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Reduction of Base Premises and Product rates by -15%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.


Penn Millers Insurance Company
 Name of Company

Crystal R. Kravits, Manager
 Official - Title

SUMMARY SHEET

Form (RF-3)

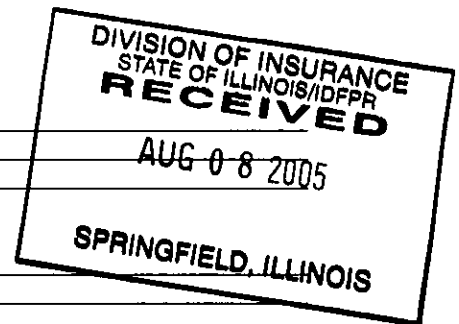
Change in Company's premium or rate level produced by rate revision
effective: October 15, 2005

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	6.9%	\$388,577
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other:		

Line of Insurance

Does filing only apply to certain territory(ies) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): _____
Adoption of ISO February 2005 loss costs and various ISO and independent changes



* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of
new rates.

State Automobile Mutual Insurance Company
Name of Company

Kathy Hartwell, Supervisor, State Filings
Official - Title

SUMMARY SHEET

Form (RF-3)

Change in Company's premium or rate level produced by rate revision
effective: October 15, 2005

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability			
Private Passenger			
Commercial			
2. Automobile Physical Damage			
Private Passenger			
Commercial			
3. Liability Other Than Auto		6.1%	\$2,289,970
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other:			

Line of Insurance

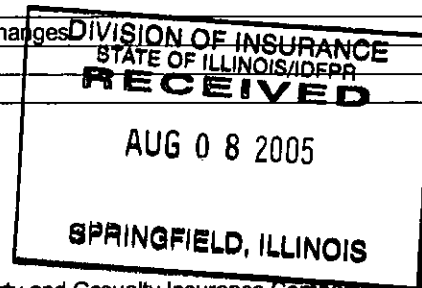
Does filing only apply to certain territory(ies) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Adoption of ISO February 2005 loss costs and various ISO and independent changes _____

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



State Auto Property and Casualty Insurance Company
Name of Company

Kathy Hartwell, Supervisor, State Filings
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 11/1/05

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	247,532	- 9.9
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?

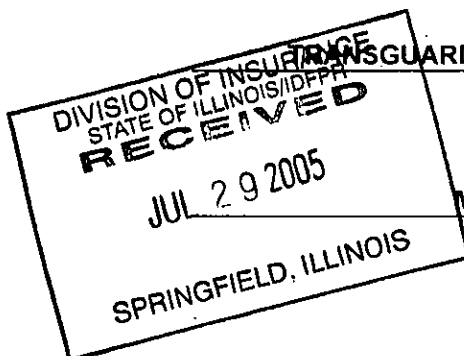
If so, specify: **Changes Premises/Operations (subline Code 334) and Products/Completed Operations (Subline Code 336) \$100,00/\$200,000 occurrence loss**

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): **Adoption of ISO filing, GL-2005-BGL1,**

Illinois Revised General Liability Advisory Prospective Loss Costs To Become Effective. The -9.9 change indicated above is the overall effect of change based on this adoption as we are not revising our loss cost multiplier.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



GUARD INSURANCE COMPANY OF AMERICA, INC.

Name of Company

Marshall Felbein, Vice President -

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11-01-2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	\$1,816.03	-3%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Certified Acts of Terrorism charge is now included in the Directors and Officers premium.

*Adjusted to reflect all prior rate changes.

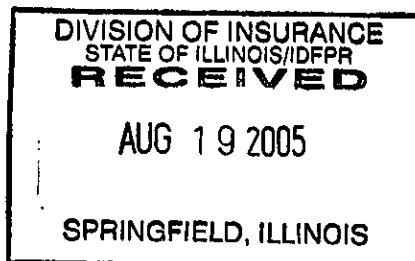
**Change in Company's premium level which will result from application of new rates.

United Fire & Casualty

Name of Company

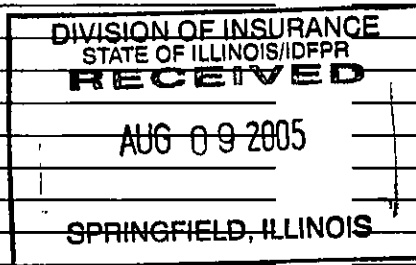
Loraine A Kelty - Product Analyst

Official - Title



Change in Company's premium or rate level produced by rate revision effective 09/01/2005

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto	Total N/A; NDO 843,239	Total N/A; NDO 6.8%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

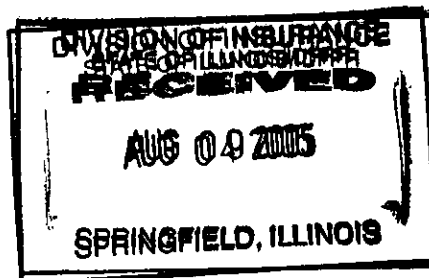
Yes, filing applies to category I, II, and III risks for coverage A and category I and II for coverage B as defined by underwriting.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Filing for 6.8% overall rate change. Filing for inclusion of new rating table for higher risk accounts and application of step factors.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

United States Liability Insurance
Name of CompanyDiane Duda - Chief Actuarial
Officer

Official - Title